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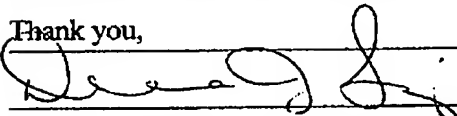
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To:	Ms. Christopher D. Koharski	From:	Deanna J. Shirley
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Fax:	(571) 273-8300	Fax:	(707) 571-8700
Phone:	(571) 272-7230	Date:	05/08/2007
Re:	10/608,862	No. of pages including cover:	12
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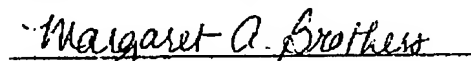
Amendment after Final Office Action mailed 3/8/2007 follows.

Please do not hesitate to contact me if anything further is required.

Thank you,


Deanna J. Shirley, Reg. No. 39,026

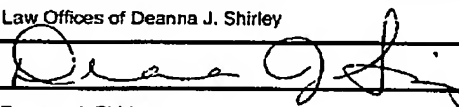
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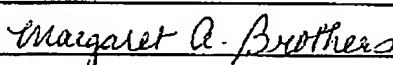

Margaret A. Brothers5/8/2007
Date

PTO/SB/21 (04-07)
Approved for use through 09/30/2007. OMB 0651-0031
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TRANSMITTAL FORM	Application Number	10/608,862	RECEIVED CENTRAL FAX CENTER MAY 08 2007
	Filing Date	06/27/2003	
	First Named Inventor	M. Bret Schneider	
	Art Unit	3763	
	Examiner Name	Koharski, Christopher	
(to be used for all correspondence after initial filing)		Attorney Docket Number	Telecath
Total Number of Pages in This Submission		12	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Law Offices of Deanna J. Shirley	
Signature		
Printed name	Deanna J. Shirley	
Date	05/08/2007	Reg. No. 39026

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Typed or printed name	Margaret A. Brothers	Date 5/8/2007

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:)	Art Unit: 3763
)	
Schneider <i>et al.</i>)	Examiner: Christopher Koharski
)	
App. No. 10/608,862)	Attorney Docket: Telecath
)	
Filed: June 27, 2003)	Date: May 8, 2007
)	
Computer Assisted Manipulation of)	
Catheters and Guide Wires)	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Amendment and Request for Reconsideration

Sir:

In reply to the Office Action mailed **March 8, 2007**, making the Office Action final and setting a shortened statutory period set to expire three (3) months from the date of mailing, Applicants submit the following Amendment and Request for Reconsideration. Applicants respectfully request that the following amendments be entered and the application be reconsidered and placed in condition for allowance.

A complete claims listing begins on page 2.